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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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hou	rs per response 16.00
	SEC USE ONLY

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)
Private placement of Preferred Interest in Varin Apartment Fund I, LLC
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6) ULOE
Type of Filing: New Filing XX Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)
Varin Apartment Fund I, LLC
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
600 Central Avenue, Ste. 280, Highland Park, IL 60035 (847) 432-1307
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)
Brief Description of Business
Acquisition, ownership, operation and investment in lowrise, low density garden-style
apartments locatediin cities and suburbs in the Midwest of the USA
Type of Business Organization
corporation Imited partnership, already formed the control other (please specify):
business trust limited partnership, to be formed Limited Liability Company
Month Year PROCESSED
Actual or Estimated Date of Incorporation or Organization: The Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  (CN) for Canada; FN for other foreign invincions  (DET)  MAR U. 6 2003
CN for Canada; FN for other foreign jurisdiction)  MAR U 6 2003
GENERAL INSTRUCTIONS THORISON

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 13 C.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C. and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information requested for the following:		
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>		
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of	f, 10% or more of	a class of equity securities of the issuer
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and mana</li> </ul>	ging partners of p	partnership issuers; and
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>		
Check Box(es) that Apply: Promoter 🔀 Beneficial Owner 🗀 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Varin Realty, LLC		
Business or Residence Address (Number and Street, City, State, Zip Code) 600 Central Avenue, Suite 280, Highland Park, Illino	is 60035	
Check Box(es) that Apply: Promoter 📑 Beneficial Owner 🕱 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Leon Heller		
Business or Residence Address (Number and Street, City, State, Zip Code) 600 Central Avenue, Suite 280, Highland Park, Illino	is 60035	
Check Box(es) that Apply: Promoter 🔀 Beneficial Owner 🔀 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	·····	
David A. Nankin		
Business or Residence Address (Number and Street, City, State, Zip Code)		
600 Central Avenue, Suite 280, Highland Park, Illinoi	is 60035	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	···	
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
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Lac the invested of the second						Yes	No						
١,	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
2.								<sub>\$</sub> 500	\$500,000				
	2. What is the minimum investment that will be accepted from any individual.							Yes	No				
3.												_	
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	i Name (	Last name	tīrst, if ind	ividual)									
Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)				<del> </del>		
Nai	me of As	sociated B	roker or De	aler			.,					<del>-</del>	
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	• • • • • • • • • • • • • • • • • • • •	***************************************					☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)	·					<del></del>
Nai	me of As	sociated B	roker or De	aler		<del></del>							····
Sta	tes in WI	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			<u> </u>			
	(Check	"All State:	s" or check	individual	States)		•••••	***************************************	***************************************	******************************		□ A1	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)							·····		
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)		· · · · · · · ·				
Nai	ne of As	sociated B	roker or De	aler		<del></del>		<del></del>		<del>_</del>			
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			<del></del>			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)													
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0 0	ş 0
	Equity	10,000,00	0 0
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	0	ş 0
	Partnership Interests	0	\$ 0
	Other (Specify)	<del>-0</del>	\$
	Total		0 80
	Answer also in Appendix, Column 3, if filing under ULOE.	,,	<b></b>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	s_0
	Non-accredited Investors	0	s_0
	Total (for filings under Rule 504 only)	0	s_0
	Answer also in Appendix. Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	<del></del>	\$
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s_0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 30,000
	Accounting Fees		s_5,000
	Engineering Fees		s 0
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify) <u>travel</u>	<b>E</b>	s_15,000
	Total	📭	s_50,000

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	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			s 9,950,000
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	by purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
	·		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		3 °C	□ s <u>0</u>
	Purchase of real estate			0.000
	Purchase, rental or leasing and installation of made and equipment	phinery	_	s <u>0</u>
	Construction or leasing of plant buildings and fac			0 s
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	7 s 0	s <u>0 '</u>
	Repayment of indebtedness			□ s <u>0</u>
	Working capital			□ s <u>0</u>
	Other (specify):		s <u>0</u>	□ s <u>0</u>
			s_0	□ s <u>0</u>
	Column Totals		s	□s 9,950,000
	Total Payments Listed (column totals added)			,950,000
		D FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fut information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commis-	sion, upon writte	le 505, the following in request of its staff.
Iss	uer (Print or Type)	Signature C	Date /	1
•	Varin Apartment Fund I, LLC	1 (()//	(/17/	03
	me of Signer (Print or Type) vid A. Nankin	Title of Signer (Print or Type) Manager of Varin Realty, LLC (	Manager of	'Issuer)

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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1.	Is any party described in 17 CFR 230.262 provisions of such rule?	• •		Yes	No X
	Sc	e Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as requi		e in which this notice is fi	led a no	tice on Form
3.	The undersigned issuer hereby undertakes t issuer to offerees.	o furnish to the state administrators, upon v	vritten request, informat	ion furn	ished by the
4.	The undersigned issuer represents that the indicated Offering Exemption (ULOE) of the of this exemption has the burden of establish	state in which this notice is filed and unders	ands that the issuer clair		
	uer has read this notification and knows the con thorized person.	tents to be true and has duly caused this notice	e to be signed on its behal	f by the	undersigned
Issuer (	Print or Type)	Signature	Date		
Var	in Apartment Fund I, LLC		1 1/12/	50	
Name (	Print or Type)	Title (Print or Type)			

Manager of Varin Realty, LLC (Manager of Issuer)

Instruction:

David A. Nankin

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.